



Receipt
#7

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

First Named Inventor	: Andrew A. Goldfine	Group Art Unit: 1772 Examiner:
Appln. No.	: 09/787,497	
Filed	: March 16, 2001	
Title	: IMPACT ABSORBING COMPOSITE	
Docket No.	: A351.12-0002	

REQUEST FOR CORRECTED OFFICIAL FILING RECEIPT

Assistant Commissioner for Patents
Office of Initial Patent Examination
Customer Service Center
Washington, D.C. 20231

I CERTIFY THAT THIS PAPER IS BEING SENT BY U.S. MAIL, FIRST CLASS, TO THE ASSISTANT COMMISSIONER FOR PATENTS, WASHINGTON, D.C. 20231, THIS 10th DAY OF

July, 2001.
Philip F. Fox
PATENT ATTORNEY

Sir:

Attached is a copy of the Official Filing Receipt received from the Patent and Trademark Office in the above-identified application for which issuance of a corrected filing receipt is respectfully requested.

There is an error in that the Title "Impact Ansorbing Composite" was incorrectly entered. The Title shown on the should instead read as follows: Impact Absorbing Composite. This correction is **not** due to any error by Applicant and therefore no fee is due.

The Commissioner is authorized to charge any fee deficiency required by this paper or credit any overpayment to Deposit Account No. 11-0982. A duplicate copy of this communication is enclosed.

Respectfully submitted,

KINNEY & LANGE, P.A.

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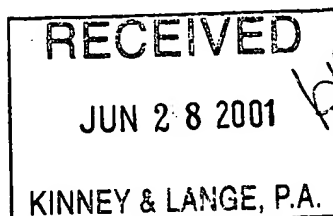
UNITED STATES PATENT AND TRADEMARK OFFICE

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WASHINGTON, D.C. 20231
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/787,497	03/16/2001	1772	803	A351.12-0002	16	52	7

CONFIRMATION NO. 3946

✓
Kinney & Lange
The Kinney & Lange Building
312 South Third Street
Minneapolis, MN 55415



FILING RECEIPT



OC00000006211798

Date Mailed: 06/25/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Andrew A. Goldfine, Duluth, MN;

Domestic Priority data as claimed by applicant

THIS APPLICATION IS A 371 OF PCT/US00/23519 08/25/2000
WHICH CLAIMS BENEFIT OF 60/151,448 08/30/1999

Foreign Applications

Projected Publication Date: N/A

Non-Publication Request: No

Early Publication Request: No

** SMALL ENTITY **

Title

Impact absorbing composite

Preliminary Class

428

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Data entry by : ORDENEZ, MARTA

Team : OIPE

Date: 06/25/2001

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Title 37, Code of Federal Regulations, 5.11 & 5.15**

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Bib Data Sheet

CONFIRMATION NO. 3946

SERIAL NUMBER 09/787,497	FILING DATE 03/16/2001 RULE	CLASS 428	GROUP ART UNIT 1772	ATTORNEY DOCKET NO. A351.12-0002
APPLICANTS Andrew A. Goldfine, Duluth, MN; ** CONTINUING DATA ***** THIS APPLICATION IS A 371 OF PCT/US00/23519 08/25/2000 WHICH CLAIMS BENEFIT OF 60/151,448 08/30/1999 ** FOREIGN APPLICATIONS ***** <div style="text-align: center;">** SMALL ENTITY **</div>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY MN	SHEETS DRAWING 16	TOTAL CLAIMS 52
		INDEPENDENT CLAIMS 7		
ADDRESS 00164				
TITLE Impact absorbing composite				
FILING FEE RECEIVED 803	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees	
			<input type="checkbox"/> 1.16 Fees (Filing)	
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